Statutory Due Date 11/01/2002 Adjusted Due Date / /

Received Date 11/04/2002

Postmark Date 11/01/2002

Amended 01/05/2004

FORM DR-2: Disclosure Summary Page

Status: Amended

ID #: 1279

Committee: Citizens for Hart

Comm Type: State House Date Due: 11/01/2002

Report Year: 2002

Treasurer: Gay D Fuhrmeister

Primary Ph. (319)484-2865 Secondary Ph. ()-

Chair:

County: NA

Amended: 1/5/2004

#### Statement of Cash on Hand

Cash on Hand at Start of Period	\$8,659.62
Schedule A: Cash contributions Total	\$8,424.70
Schedule F: Loans Received Total	\$0.00
Schedule H: Campaign Property Sales	\$0.00
SUB-TOTAL	\$17,084.32
Schedule B: Expenditure Total	\$13,031.35
Schedule F: Cash Loan Repayments	
Cash on Hand At End of Period	4,052.97

#### Additional Assets and Liabilities

Loans in Place at Start of Period	\$0.00
Schedule D: UnPaid Bills	\$2,645.46
Schedule E: In-Kind Contributions	\$15,375.54
Schedule F: Forgiven Loans	
Schedule F: Outstanding Loans	\$0.00
Schedule G: Consultant Breakdown?	No
Schedule H: Campaign Property Value	

	State of the second	18	FORM	i
DISCLOSURE SUMMARY PAG	Reset For	m	DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organ	ization)		Rev. 05/2002)	REPORT
Citizens for Hart		F	or Office Use O	nly
IMPORTANT: Indicate type of committee you are reporting for:			Comm. #	274
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City C	4 )County/Local Candidate	, , ,	Audited	
(8)Support Slate of Candidates	AND THE RESERVE AND THE PROPERTY OF THE PROPER	'	Computer	
CANDIDATE COMMITTEES ONLY:				
Candidate Name Gary Hart	Political Party Domocratic			O. D
Office Sought	District (if Senate or House		NOV	- 4 2002
Down House of Representative	31 st.			nm 11-1
			FILED	
Saw Fulrmoustu	319-484-2	865	70	-30-02
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATES	SIGNED
Doubles Devolting Due Contrate	Filed Deports Benge (	rom ¢	00 to \$000	
Routine Penalties Due For Late			20 10 2000	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE				
1 AM FILING A	REPORT FOR AN/A (1) ELE	ECTION A	(2)NON-ELEC	TION YEAR.
(report date)	in	dicate or	ne 🔟	
□CHECK IF AMENDMENT TO REPORT DATED		Local Co	mmittees, enter (	Date of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a Notice of Diss			Local Committe ection is held	es, enter County in
STATEMENT	OF CASH ON HAND			
CACH ON HAND at the beginning of the reporting period. (This		d		
CASH ON HAND at the beginning of the reporting period. (This by the committee. This amount MUST be the same as	s is the total of all monies hel	1	0 0	(1.90
CASH ON HAND at the beginning of the reporting period. (This by the committee. This amount MUST be the same as of the last reporting period, or must be zero if this is fire	s is the total of all monies hel	1	8,3	61.80
by the committee. This amount MUST be the same as	s is the total of all monies hel	1		
by the committee. This amount <b>MUST</b> be the same as of the last reporting period, or must be zero if this is fir	s is the total of all monies hel s the cash on hand at the end st report filed.)	<u> </u> \$		61.80 24.70
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ror n	nstructions.	See	Dack	O1	LOUII

## **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on	Statement of Organization)
Cutizens for	Hart

SCHEDULE	
A	MONETARY
(Rev. 06/97)	RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/17/02	000	Down State UAW Committee 2700 S. River St. 200 Des Plaines, III. 60018		\$ 200 <u>00</u>	
10/18/02	ID# 60 <b>6</b> 0 CK# 2168	Iown Committee on Political Educati 2000Walker, Suited AFL-CIO Des Moines IA 50317	01	40000	
10/18/02	ID# 9098 CK# 17337	IOWA Demorate Porty 5661 Fleur Drive Des Moines, IA 50321		1,5000 <u>00</u>	
10/19/02	ID# <b>8</b> 125 CK# 1669	Effective Government Committee Notederal Inva- GOD 14th St. NW.STE 800 Washington DC 20005		1,00000	
19/19/02	ID# CK#	Rose Topping 17709 Got4Ave Onslaw, IA 52321		5000	
10/19/02	ID# CK#	Paul Sauser 305 3rd Ave NW Cascade, IA 52033		2500	
10/24/02	CK#	Onita Mohr Onita Mohr 2962 Middle Sattreld, Decorah, IA 52101 ABATEPAC		5000	
10/21/02	ID# GQ37 CK# 1535	3118 Eastern Ave NE Ceder Rapids, IA 52402		25000	
10/21/02	ID#	Marc Tschantz 104 Monk Ct, Montveello, IA 52310		4000	
	ID# CK#	Unitemized Contributions	SUB-TOTAL	43100 29400	

TOTAL (if last page of this schedule)

Page \_\_\_\_\_ of \_\_\_\_\_

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN  (Including candidate's personal funds)	(Rev. 06/97)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)  Oitizens for Hant		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
		NUMBER				INCOME
	10/23/02	CK# 3378	Dubugue County Democratic Central Committee P.O. Bux 686 Dubugue, IA 52004		\$ 178 20	
		ID#	Dabague, +A 52004			
	10/23/02	CK#	Patric Lynch 14118 KathleenCt, Dubugue,IA 52003		100 00 20000 4,00000	V
	·	ID# 6279	IA. Optha mology Association	l		
	10/28/02	ск# 2036	IA. Optha mology Association 1501 Som St. Suite 133 West Des Moines, IA SORGO		20000	
		ID# 9098	Iowa Domocratic Party 5661 Flear Drive			
	19/29/02		Dos Moines, IA 50321		4,00000	
		ID#				
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		CK#				

TOTAL (if last page of this schedule)

SUB-TOTAL

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

\$8424<sup>29</sup>

Page of of (for Schedule A)

Reset Form

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
<b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Citizens for Hart

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1915/02	ID# CK# /321	Iona Wireless 3820 1097454, Urbendele, IA 50391	Campain 2nd Ce4 Phme	\$ 39 <u>54</u>
10/15/02	ID# CK# /322	Mailing Services 200 SotyAre SuiteB Cedar Rapids, IA52404	Postage for Two Mailings	2,390 56
10/16/02	ID# CK# /323	Monticello Express 111 E. Grand Monticello, IA 52316	Display Advertising	10920
10/16/02	CK# 1324	Midland Times 30 / Wiwebsyon Wyoming, IA 52362	Display Ad	8400
10/16/02		Anamosa Journal 208 w. Main Anamosa, IA 52205	Display Ad	103 20
10/16/02		Cascado Pioneer 116 1st. Ave W Cascado, IA 52033	Display Ad.	16065
10/21/02	<sub>ск#</sub> /327	Radio Dubuque 346 8th Are Dubugue, IA 52001	radio Advertising Time	2,7/200
10/21/02	ск# 1328	KDST Radio 1931 20th Ave SE Dyers Ville, IA 52040	radio Adertising	812 50
			SUB-TOTAL	\$ 6,4/1,95

TOTAL (if last page of this schedule)

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page

Reset Form

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MON
(Rev. 09/97)	EXPE

MONETARY EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Hant

				1
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/23/02	CK# 1329	Mailing Services 200 Soth Ave Suite B Cedar Ropids, IA 52404	Postage for CampainAd.	\$132000
192402	CK#1336	KHAK Radio 425 2ngst, St Celai Rapids, IA52401	Redio Advertising Time	2,04000
10/24/02	` <u> </u>	WMT GOO OLD Manon Rd, Cedar Ropids, IA 52402	Radio Ad. Time	2,21000
10/25/02	ID# CK# /332	WMT 600 Old Marin Rd. Cedo, Rapids, IA 5240	Radio Ad Time	35700
10/25/02	ID# CK# /333	Anamosa Paplicatin 208 W. Main Anamosa, It 52205	Slyer Insert for Town Crier	228 40
19/24/02	CK# /33 4	Mailing Services 200 50 The Suite B Cedar Rapids, IA 52404	Postage for Campain Advertising	40000
10/29/02		Cascade Pioneer 116 1st. Ave W Cascade, IA 5 2033	Dusent for Newspaper	6400
	ID# CK#			
			OUD TOTAL	\$ CC 10 110

SUB-TOTAL

TOTAL (if last page of this schedule)

\$13,031.35

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page of O

FOR INSTRUCTIONS, SEE BACK OF FORM	
COMMITTEE NAME (Must be same as on Statement of Organization)	
Citizens for Hart	

NOTE:	Debts previously reported that remain unpaid must be included on this
	Schedule, as well as any new obligations incurred in this period.

<ul> <li>add six add security division and</li> </ul>
Reset Form

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
	CK THIS BOX MENDING M

# DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

		nas pe	en received.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/16/02	Carter Printing 1939 E. Grand Ade Des Moines, IA S0316	Printing of Oversize Postand	1,144 80
10/16/02	Mailing Services 200 Soth Ave Suite B Cedar Rapids, In 52404	Handling fee on Mailing	23913
10/24/02	Canter Printing 1739 E. Grand Ard Des Moines, IA 503/6	Printing of Maidings	1,049 40
10/24/02	Iowa Wineless 3820 1094954, Urbandale, IA 50391	Campaign Cell Phone	21213
		SUB-TOTAL	<sup>\$</sup> 2645 46

\*If actual figure is unknown, show "estimated" beside the figure.

Page \_\_\_\_\_ of \_\_\_\_ (for Schedule D)

### **CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD

FOR INSTRUCTIONS SEE	BACK OF FORM

COMMITTEE NAME (Must be s	ame as on Statement of Organization)	
Citizens	for Hart	
OTTECHS	JOI JULY	

SCHEDULE E	IN KIND
(Rev. 06/97)	CONTRIBUTIONS
(1.01.00/01)	
	THIS BOX IF

## Reset Form

	;		DELATIONOUS	DESCRIPTION	ESTIMATED	√ IF FOR
DA RECE	IVED	NAME AND ADDRESS	RELATIONSHIP TO CANDIDATE	OF IN KIND	FAIR MARKET	FUND-RAISER
(MM/D	D/YR)	OF CONTRIBUTOR	* (if applicable)	CONTRIBUTION	VALUE	CONTRIBUTION
10/15	5/02	OF CONTRIBUTOR  OF CONTRIBUTOR  DE DOMA DE MOCRATIC PARTY  SE SEGI Fleur Drive  STOWN DE MOCRATIC PARTY  SEGI FLEUR Drive  Des Moines, DA 50321		Production for Directi Mail Piece	\$ 2,900°°	
19/18/	02	SE Des Moines, DA 50321		Production Sor Direction Mail Piece	2,981 <del>88</del>	
10/2	4/02	/ / / / /		Postage for Direct Mail Piece	611 87	
	1/02	n n		Production Sor Direct Mail Piece	8,269 <sup>92</sup>	
10/2	9/02	n A		Postage for Direct. Mail Piece	61187	
	SUB-TOTAL				\$ 15,395 <sup>54</sup>	
	TOTAL (if last page of this schedule)				\$ 15,375 \$\frac{54}{15,375}\$	
*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the					e Page	' of

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_ (for Schedule E)